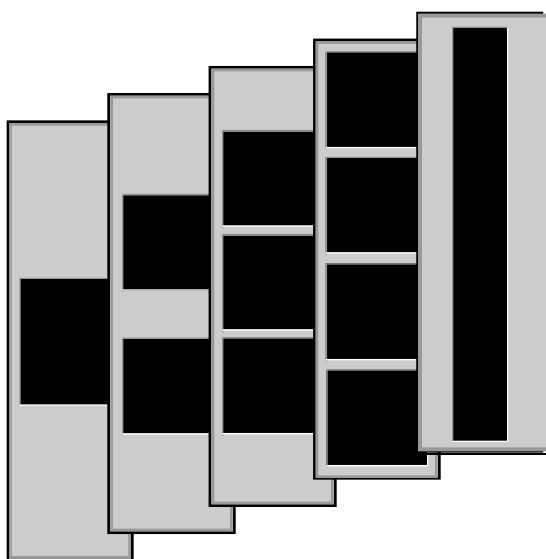




# United States Army Recruiting Command



## US ARMY WARRANT OFFICER PROCUREMENT PROGRAM SAMPLE APPLICATION AND GUIDE



[WWW.USAREC.ARMY.MIL/WARRANT](http://WWW.USAREC.ARMY.MIL/WARRANT)

**JANUARY 2009**

The information contained in this sample application changes frequently. For the most up-to-date information please visit our web-site at [www.usarec.army.mil/hq/warrant](http://www.usarec.army.mil/hq/warrant).

## **STEPS IN PROCESSING A WARRANT OFFICER APPLICATION**

**Step 1:** Visit the Warrant Officer (WO) recruiting web site at: <http://www.usarec.army.mil/warrant>. Start with the "Program Overview" and follow the instructions to download the forms for use with PureEdge or Adobe Acrobat software.

**Step 2:** Review Army Regulation 135-100 and Department of the Army Pamphlet 601-6. (All Army publications mentioned throughout this guide are located on the warrant officer recruiting website at [http:// www.usarec.army.mil/warrant](http://www.usarec.army.mil/warrant)).

**Step 3:** Verify that you meet the following Administrative requirements:

- (a) US citizenship
- (b) General Technical (GT) score of 110 or higher (DoD service applicants must convert their GT scores - see web site)
- (c) Be a high school graduate or hold a GED
- (d) Secret security clearance (Interim secret is acceptable to apply - IAW AR 380-67 & AR 135-100)
- (e) Pass the standard 3-event Army Physical Fitness Test (APFT) and meet height/weight standards (IAW FM 21-20 & AR 600-9)
- (f) Pass the appointment physical for Technicians or the Class 1A flight physical for Aviators (IAW AR 40-501)
- (g) Minimum of 12 months or more remaining on current service contract as of board convene date

**Step 4:** Ensure you meet the **MINIMUM** prerequisites listed on our web site for your requested WO Military Occupational Specialty (WOMOS). If you do not, you must either wait until you meet all the prerequisites or request a prerequisite waiver. **Prerequisites for 153A - Aviator:** Open to any rank and MOS (after AIT completed), must be less than 33 years of age by the board convene date, score 90 or higher on the AFAST, and pass a Class 1 flight physical. **General prerequisites for all other WOMOSs:** SGT or higher, 4-6 years experience in the field for which applying (see web site), and be less than 46 years of age by the board convene date.

**Step 5:** It is recommended that you keep all original documents, including the physical, for reference. Packets can be submitted by Digital Sender or in PDF format as an e-mail attachment (see step 12). DA photos may be sent in PDF, TIF or JPG format; color photos present the best image of applicants. Deployed personnel may take a digital photo in duty uniform standing at the position of attention with a neutral background (no scenery, helmets or weapons).

**Step 6:** Take the completed packet to your Personnel Services Detachment (PSD), Military Personnel Division (MPD) or S-1 office for review. Have a NCO or OIC endorse your checklist stating you are not barred, flagged or pending UCMJ action. **Non-Army** personnel can skip this step and submit their application as indicated in step 12.

**Step 7.** Once at USAREC, the packet will be logged in to the computer, and then screened for completeness. You will be notified of any discrepancies by phone or email using the contact information in blocks 17 & 19 of your DA Form 61. (Ensure the email address on your DA Form 61 is an email that you check daily.) Verify your status online before calling/emailing recruiters.

**Step 8:** Technician packets are forwarded to their Branch WO proponent for technical evaluation. Aviator applications are evaluated at USAREC unless a waiver is required. Proponent-qualified applications are considered "board-ready" if no waivers are needed. The applicant will be notified if not qualified by the proponent or if waivers are disapproved. Please allow 4 - 6 weeks for processing of waivers.

**Step 9:** Applications requiring a moral waiver (if block 26 of the DA Form 61 is answered YES) are forwarded to Army Reserve Personnel Command (AR-PERSCOM), St Louis, MO by USAREC. Please allow 4 - 6 weeks for processing waivers.

**Step 10:** Applications requiring an Active Federal Service (AS) waiver\* or an age waiver\*\* are forwarded to the Deputy Chief of Staff for Personnel (DCSPER) at HQDA. Please allow 4 - 6 weeks for processing waivers.

\***AFS Waiver** 12 or more years active service at the time the DA Form 61 is signed.

\*\***Age Waiver** Aviator applicants who are 33 or older by the convene date of the board, or Technical WO MOS applicants who are 46 or older by the convene date of the board.

**Step 11:** Accession boards are held bimonthly at USAREC starting in November, but not all MOSs are considered at each board. The board vote results in one of the following designations:

**Selected, Qualified - Select (Q-S)** (You have been selected and will attend WOCS in approximately 4 - 6 months)

**Fully Qualified - Non-selected (FQ-NS)** (You have not been selected and will be considered by one more board automatically. It is highly recommended to make any updates that you feel will improve you packet at this time.)

**Not Selected - Not Competitive (NS-NC)** (You have not been selected by 2 consecutive boards, and are not considered competitive with current packet provided). Applicants twice non-selected for the WO Program may reapply immediately if they otherwise remain qualified however, their original electronic packet will not be kept on file. Please see the web site for process to re-apply.

**Step 12:** Visit our web site at least monthly for new or updated information and for board results (normally published the week following a board). Packets are due the 1<sup>st</sup> day of the month, prior to the board month. Packets should be sent via PDF e-mail attachment, 5mbs or less in size per e-mail. Number multiple e-mailings appropriately; 1 of 4, 2 of 4, etc. Send all documents to HQs, USAREC Board Branch as follows:

- \* a. **Send NEW Packets in PDF format to:** [NewWarrantPackets@usarec.army.mil](mailto:NewWarrantPackets@usarec.army.mil)
- b. **Send UPDATES to packets already accepted and on file to:** [NewWarrantUpdates@usarec.army.mil](mailto:NewWarrantUpdates@usarec.army.mil)
- c. **Send CORRECTIONS for "R" status packets to:** [NewWarrantCorrections@usarec.army.mil](mailto:NewWarrantCorrections@usarec.army.mil)
- d. **ONLY deployed or overseas personnel may mail their packet to the address below however, electronic submission is preferred.**  
COMMANDER, HQ USAREC  
ATTN: RCRO-SM-A  
1307 3RD AVE  
FT KNOX, KY 40121-2726

\*Please, only use one method of delivery and do not split packets between different means unless asked by a recruiter to do so. Check your application status on-line at [www.usarec.army.mil/warrant](http://www.usarec.army.mil/warrant) after allowing 5 – 10 business days for processing. Good luck!

# Warrant Officer Application Checklist

All documents should be single-sided copies and in the following order:

Name: \_\_\_\_\_

## Board Packet (These copies should be clean and neat in appearance – they will make up your board packet being reviewed for your selection):

- \_\_\_ DA Form 61 (with HT/WT and APFT statement, signed as shown on the web site example)
- \_\_\_ Senior Warrant Officer Letter (Optional for some WOMOS)
- \_\_\_ Company Commander Letter of recommendation (or applicable Company Grade UCMJ authority)
- \_\_\_ Battalion Commander Letter of recommendation (or applicable Field Grade UCMJ authority)
- \_\_\_ Resume (USAREC Form 1935)
- \_\_\_ ERB or equivalent document (used to verify DOB, GT, AFS, and ETS)
- \_\_\_ OMPF Hard Copies (Last ten **years** of NCOERS and all AERS in order newest to oldest)
- \_\_\_ College Transcript(s)
- \_\_\_ COPIES of Professional Certificates (Licenses or Certificates issued to Engineers, Mechanics etc...)
- \_\_\_ AFAST Results (153A applicants only)
- \_\_\_ DA Photo

## Supporting Documents: (These documents are required to qualify your packet, but will not be reviewed by the board)

- \_\_\_ Security clearance (DO NOT SEND DA Form 873, minimum Interim Secret clearance required)
- \_\_\_ Physical Coversheet USAREC Form 1932 (Aviation - expires after 18 months, all others expire at 24 months. If waiver or exception to policy required, applicant needs to send complete physical. 153A applicants need to send DD 2808 with Stamp from USAAMC, Ft. Rucker)
- \_\_\_ DA Form 160-R enclosed (ensure that you sign it and block 9a is checked)
- \_\_\_ Remaining Hard Copy documents from OMPF not included on your ERB (awards, certificates)
- \_\_\_ Re-enlistment documents if ERB does not show 12 months remaining
- \_\_\_ Statement of understanding enclosed (a copy of this memo is on the web site)
- \_\_\_ Conditional Release enclosed if you are not an active duty Army applicant
- \_\_\_ English credit document if required (250N, 251A, 254A, 420A, 920A, 920B, 921A, 922A, 923A)
- \_\_\_ TABE score document if required (880A, 881A)
- \_\_\_ Body fat statement enclosed on DA 61 (if required)
- \_\_\_ Moral waiver request if required (as identified in blocks 26 on DA Form 61)
- \_\_\_ Age waiver request enclosed if required (max age is 33 for aviators, 46 for all others)
- \_\_\_ Prerequisite waiver request enclosed if required (verify with MOS on web site)
- \_\_\_ AFS waiver request enclosed if required (12 years for all MOS)
- \_\_\_ APFT waiver request enclosed if required (must include Physical Profile and complete Physical with packet)
- \_\_\_ Checklist endorsed by PSB or S-1 NCO is acceptable (validating soldier is not flagged or barred)
- \_\_\_ **ONLY** deployed personnel may mail their completed application however, electronic submission is preferred:

HEADQUARTERS US ARMY RECRUITING COMMAND  
ATTN RCRO-SM-A  
1307 THIRD AVENUE  
FORT KNOX KY 40121-2725

-----  
This section to be completed and authenticated by PSD/MPD personnel or the Battalion S-1.

I certify that service member is not flagged and is eligible to apply for this program.

REVIEWER (printed name and title): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

DSN PHONE #: \_\_\_\_\_ COMM PHONE #: \_\_\_\_\_

EMAIL: \_\_\_\_\_

\*CONUS applicants must send their packets via PDF attachment e-mail or by use of the Digital Sender, (file size restricted to 5mbs or less per transmission) to [NewWarrantPackets@usarec.army.mil](mailto:NewWarrantPackets@usarec.army.mil)

\*Deployed personnel may mail their application however, electronic submission is preferred.

For use of this form, see AR 135-100, AR 145-1, AR 351-5, and AR 601-100; the proponent agency is DCSPER

<b>AUTHORITY:</b>	Title 10 United States Code, Section 3012 (Title 5 United States Code, Section 552a)
<b>PRINCIPAL PURPOSE:</b>	To obtain an appointment as a commissioned or warrant officer in the Regular Army or Army Reserve, or to obtain selection to attend the US Army Officer Candidate School.
<b>ROUTINE USES:</b>	Basis for determination of qualifications and background information for eligibility for consideration for appointment as a Regular Army or Army Reserve commissioned/warrant officer or for selection for attendance at the US Army Officer Candidate School.
<b>DISCLOSURE</b>	Disclosure of information requested in DA Form 61 is voluntary. Failure to provide the required information will result in non-acceptability of the application.

DA FORM 61, JUN 81 EDITION OF 1 AUG 74 AND DA FORM 61-R, 26 SEP 75, PRIVACY ACT STATEMENT, ARE OBSOLETE. USAPPC V2.00

24. ARE YOU NOW, OR HAVE YOU EVER BEEN A CONSCIENTIOUS OBJECTOR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <i>(If yes, attach affidavit)</i>							
25. <input checked="" type="checkbox"/> I UNDERSTAND THAT, IF I AM SELECTED FOR APPOINTMENT, I WILL BE EXPECTED TO ACCEPT SUCH ASSIGNMENTS AS ARE IN THE BEST INTEREST OF THE SERVICE REGARDLESS OF MY MARITAL STATUS AND/OR RESPONSIBILITY FOR DEPENDENTS; AND IT IS MY RESPONSIBILITY TO MAKE APPROPRIATE ARRANGEMENTS FOR THE CARE OF MY DEPENDENTS SHOULD I BE REQUIRED TO PERFORM DUTY IN AN AREA WHERE DEPENDENTS ARE NOT PERMITTED.							
26. HAVE YOU EVER UNDER EITHER MILITARY OR CIVILIAN LAW BEEN INDICTED OR SUMMONED IN TO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING <i>(Including any proceedings involving juvenile offenses, article 15, UCMJ, and any court-martial)</i> REGARDLESS OF THE RESULT OF TRIAL OR CONVICTED, FINED, IMPRISONED, PLACED ON PROBATION, PAROLED OR PARDONED, OR HAVE YOU EVER BEEN ORDERED TO DEPOSIT BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE? <i>(Exclude traffic violations involving a fine or forfeiture of \$100 or less).</i>  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    IF YES, ATTACH REQUEST FOR WAIVER LISTING THE DATE, THE NATURE OF EACH ALLEGED OFFENSE OR VIOLATION, THE NAME AND LOCATION OF THE COURT OR PLACE OF HEARING, AND THE PENALTY IMPOSED OR OTHER DISPOSITION OF EACH CASE AND FURNISH COPY OF COURT ACTION OR DETAILED STATEMENT IN AFFIDAVIT FORM AS TO THE OUTCOME OF EACH CASE.							
27. <b>ACTIVE MILITARY SERVICE</b> <i>(Indicate tour with each organization separately - show ROTC Camps in Item 39)</i>							
	ENLISTED	a. ORGANIZATION <i>(US Armed Forces, USCG, NOAA, US Public Health Service, Peace Corps)</i>	b. DATES <i>(Day, Month, Year)</i>		c. BRANCH/MOS <i>(As appropriate)</i>	d. PRIOR SERVICE NO. <i>(If applicable)</i>	e. HIGHEST GRADE AND COMPONENT
			FROM	TO			
		US Army	25 Jun 99	Present	35L3P	NA	E-6/RA
	WARRANT OFFICER						
	COMMISSIONED						
f. DATE CURRENT ACTIVE DUTY TOUR TERMINATES			ETS: 17 Oct 2015		g. DATE OF LAST ADL PROMOTION		
					DOR: 1 Aug 2005		
28. <b>RESERVE OR NATIONAL GUARD SERVICE</b> <i>(Not on active duty)</i>							
	ENLISTED	a. ORGANIZATION <i>(US Armed Forces, USCG, NOAA, US Public Health Service, Peace Corps)</i>	b. DATES <i>(Day, Month, Year)</i>		c. BRANCH/MOS <i>(As appropriate)</i>	d. PRIOR SERVICE NO. <i>(If applicable)</i>	e. HIGHEST GRADE AND COMPONENT
			FROM	TO			
		US Army Reserve	2 Feb 91	24 Jun 92	11B10	NA	E-4/USAR
	WARRANT OFFICER						
	COMMISSIONED						
29. SOURCE OF CURRENT COMMISSION <i>(If applicable)</i> ARNGUS: <input type="checkbox"/> OCS <input type="checkbox"/> DIRECT APPOINTMENT USAR: <input type="checkbox"/> ROTC <input type="checkbox"/> ROTC <i>(ECPI)</i> <input type="checkbox"/> ROTC <i>(SMP)</i> <input type="checkbox"/> OCS <input type="checkbox"/> DIRECT APPOINTMENT				30. AWARDS <i>(Do not list theater or service medals)</i> <b>MSM-2, ARCOM-4, AAM-2</b> <b>(Achievement Awards Only)</b>			
31. HAVE YOU EVER APPLIED AND NOT BEEN SELECTED FOR:    a. ROTC <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    b. OCS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							
c. APPOINTMENT IN RESERVE COMPONENT <i>(USAR/ARNG)</i>			YES	NO	d. APPOINTMENT IN REGULAR ARMY		
AS A WARRANT OFFICER				X	AS A WARRANT OFFICER		
AS A COMMISSIONED OFFICER				X	AS A COMMISSIONED OFFICER		
e. IF ANSWER IS "YES", EXPLAIN FULLY							
32. ARE YOU NOW OR HAVE YOU EVER BEEN IN THE MILITARY SERVICE OF OR BEEN EMPLOYED BY A FOREIGN GOVERNMENT <i>(If yes, give dates, country and type of service or employment)</i> <b>No</b>							
33. HAVE YOU EVER RESIGNED OR BEEN ASKED TO RESIGN IN LIEU OF ELIMINATION PROCEEDINGS; BEEN DISCHARGED IN LIEU OF ELIMINATION, FURLOUGHED <i>(other than regular furlough or leave)</i> , OR PLACED ON INACTIVE STATUS WHILE SERVING IN THE US ARMED FORCES; OR, HAVE YOU EVER RESIGNED OR BEEN ASKED TO RESIGN FROM A POSITION WHILE IN PRIVATE OR GOVERNMENT EMPLOYMENT? <i>(If yes, state circumstances; if more space is required, continue on separate sheet).</i>  <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							

<b>34. APPLICANTS FOR JUDGE ADVOCATE GENERAL'S CORPS ONLY</b>				<b>35. APPLICANTS FOR CHAPLAINS BRANCH ONLY</b>	
BARS OF WHICH YOU ARE A MEMBER <i>(Specify dates)</i>				RELIGIOUS DENOMINATION BY WHICH YOU WILL BE ENDORSED	
<b>36. APPLICANTS FOR MEDICAL AND DENTAL CORPS ONLY</b>					
a. TRAINING		b. NAME AND LOCATION OF HOSPITAL		c. DATES <i>(Month and Year)</i>	
LEVEL	TYPE			FROM	TO
INTERNSHIP					
RESIDENCY TNG					
SPECIALTY TNG					
d. SPECIALTY BOARDS				e. DATES OF CERTIFICATION <i>(Day, Month, Yr)</i>	
f. PLACE IN WHICH CURRENTLY LICENSED					
<b>37. APPLICANTS FOR ARMY NURSE CORPS AND ARMY MEDICAL SPECIALIST CORPS ONLY</b>					
a. NAME OF NURSING OR ACCREDITED PROFESSIONAL SCHOOL			b. LOCATION		
c. DATES OF ATTENDANCE <i>(Mo, Yr)</i>		d. STATE AND CURRENT REGISTRATION NUMBER		e. STATE AND DATE OF INITIAL REGISTRATION <i>(Day, Month, Year)</i>	
FROM	TO				
f. POSTGRADUATE COURSES <i>(Include courses at general hospitals, service schools, and short courses)</i>					
(1)	(2)		(3)	(4)	
SUBJECT OR COURSE	NAME AND LOCATION OF SCHOOL OR HOSPITAL		SEMESTER CREDITS EARNED	FROM	TO
38. HAVE YOU BEEN EMPLOYED BY THE US ARMY AS A DIETITIAN, OCCUPATIONAL OR PHYSICAL THERAPIST? <i>(If yes, give dates)</i>					
<input type="checkbox"/> YES <input type="checkbox"/> NO					
<b>39. ARMY ROTC</b> <i>(To be completed only by prospective ROTC graduates applying for appointment in USAR or RA)</i>					
SUCCESSFULLY COMPLETED AROTC PROGRAM AS FOLLOWS					
COURSE	DATES ATTENDED <i>(Month and Year)</i>		c. CAMP TRAINING		
	FROM	TO			
a. BASIC			(1) INSTALLATION <i>(Basic)</i>		COMPLETION DATE <i>(Month, Year)</i>
b. ADVANCED			(2) INSTALLATION <i>(Advanced/Ranger)</i>		COMPLETION DATE <i>(Month, Year)</i>
<b>40. MAIN CIVILIAN EMPLOYMENT</b>					
a. NAME AND ADDRESS OF EMPLOYER			b. JOB TITLE		c. MONTH AND YEAR
Kelly Temporary Services Grand Rapids, MI 48722			Secretary/Typing		FROM
					TO
					0292
					0692
b. PRINCIPAL DUTIES <i>(Describe briefly)</i>					
Typed letters, kept personnel files updated, answered inquiries					
41. REMARKS <i>(Experience, proficiencies and special abilities not shown elsewhere in this application. Those required to enter primary entry specialties, see Para 1-27d,e, AR 601-100). (If more space is required, attach additional sheet)</i>					
I certify that (Applicant's Name) successfully passed the APFT consisting of pushups, situps, and the two mile run with a score of _____ on _____; the verified height is _____ and verified weight is _____. (Applicant's Name) is within body fat standards according to AR 600-9.					
JOHN Q. DOE CPT, MI Commanding					
42. THE INFORMATION CONTAINED HEREIN IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.			DATE	SIGNATURE OF APPLICANT	
			Current Date	Applicant's Signature Here	

**WARRANT OFFICER RESUME**

(This form will be used in place of the resume.)

**PRIVACY ACT STATEMENT****AUTHORITY:** Collection of this information is authorized by Title 10, USC, Sections 503, 505, 508, 3013, and 12102 and Executive Order 9397.**PRINCIPAL PURPOSE:** Information collected will be used by selection board members to determine qualifications of warrant officer candidates.**ROUTINE USES:** Blanket routine use disclosures as described in AR 340-21, The Army Privacy Program, paragraph 3-2.**DISCLOSURE:** Voluntary; however, failure to provide the information may delay or terminate the warrant officer candidate's application process.**SECTION I - ADMINISTRATIVE DATA**

1. NAME (Last, first, middle initial):

SAMPLE, Joe E.

2. SSN:

123-45-6789

3. RANK/GRADE:

SGT/E5

4. PMOS:

42A2P

5. UNIT, ORGANIZATION, STATION, ZIP CODE OR APO, MAJOR COMMAND:

C DET 1-4 INF BATTALION, FT ATTERBURY, KY 40121 (CENTCOM)

6. E-MAIL ADDRESS:

Joe.e.sample@us.army.mil

**SECTION II - CIVILIAN EDUCATION**

(Include the highest degree level obtained. Include your GPA, Dean's List, and any other special recognition.)

(This section should match Block 21 of the DA Form 61)

BA Degree - Liberty University, (intended graduation May 2012), 108 credits completed, 3.2 GPA

AA Degree - University of Phoenix, 1999 GPA 3.5, Dean's List

**SECTION III - OBJECTIVE**

(List all of the warrant officer MOSs to include 4-digit code and official title you are applying for in order of preference.)

1. 153A - Rotary Wing Aviator

2. 420A - Human Resources Technician

3.

**SECTION IV - MILITARY EXPERIENCE**

(List in order from most recent to earliest duty assignment or position. Be sure to mention any accomplishments, special recognition, or achievements that will illustrate to the board your potential for leadership as a warrant officer.)

1. DATES (YY/MM): 07/07 to Present ORGANIZATION: 95th Special Troops Battalion, Ft Carson, CO

POSITION TITLE: TITLE should match ERB or evaluation reports

DUTIES (list below to include significant contributions):

Accomplishment should appear in chronological order, by date, starting with the most current assignment.

List ALL military assignments; especially those in an NCO position. Focus on quantifiable measurements of success that set you apart by the unique characteristics of each assigned position. Write in clear, concise, yet complete sentences - not in fragments or bullets.

2. DATES (YY/MM): 05/06 to 05/05 ORGANIZATION: HHC, IIIId ACA, Ft Hood, TX

POSITION TITLE: PROMOTION SECTION NCOIC

DUTIES (list below to include significant contributions):

List outstanding achievements and additional duties while in serving in that position. Spell out terms that apply to your assignment especially buzzwords in your MOS, e.g. Prescribed Load List (PLL). Avoid the use of jargon, slang, and other types of informal terms.

**SECTION IV - MILITARY EXPERIENCE** *(continued)*

(List in order from most recent to earliest duty assignment or position. Be sure to mention any accomplishments, special recognition, or achievements that will illustrate to the board your potential for leadership as a warrant officer.)

3. DATES (YY/MM): 03/09 to 05/05 ORGANIZATION: A Det, 82d PSB, Ft Bragg NC

POSITION TITLE: ENLISTED RECORDS NCO

DUTIES *(list below to include significant contributions):*

Focus on measurements of success, NOT just a job description, but how well you performed the job. Use NCOER/evaluation bullets as a "reference only", not as the actual written entry for the resume. Mention if you exceeded standards on a significant inspection/evaluation or leadership school. List deployments or make a separate assignment entry if deployed for several months.

4. DATES (YY/MM): 02/09 to 03/08 ORGANIZATION: C Det 516th PSC, Korea

POSITION TITLE: REASSIGNMENTS CLERK

DUTIES *(list below to include significant contributions):*

List service, impact or achievement awards received during each assignment tenure. Significant contributions in major field training exercises e.g ULCHI FOCUS LENS, JROTC, NTC may be listed. List career enhancement events such as Soldier/NCO of the month/qtr boards as well as Audie Murphy and similar enlisted club inductions.

5. DATES (YY/MM): \_\_\_\_\_ to \_\_\_\_\_ ORGANIZATION: \_\_\_\_\_

POSITION TITLE:

DUTIES *(list below to include significant contributions):*

**SECTION IV - MILITARY EXPERIENCE** *(continued)*

(List in order from most recent to earliest duty assignment or position. Be sure to mention any accomplishments, special recognition, or achievements that will illustrate to the board your potential for leadership as a warrant officer.)

6.	DATES (YY/MM): _____ to _____	ORGANIZATION:
	POSITION TITLE: DUTIES <i>(list below to include significant contributions):</i> Use this side as a continuation from the previous page. Be sure to summarize assignments as not to exceed the last 11 duty positions on record. Again, focus on measurements of success NOT just a job description.	
7.	DATES (YY/MM): _____ to _____	ORGANIZATION:
	POSITION TITLE: DUTIES <i>(list below to include significant contributions):</i>	
8.	DATES (YY/MM): _____ to _____	ORGANIZATION:
	POSITION TITLE: DUTIES <i>(list below to include significant contributions):</i>	

**SECTION V - CIVILIAN EXPERIENCE**

(List in order any civilian experience that specifically relates to the warrant officer position for which you are applying. Be sure to mention any accomplishments, special recognition, or achievements that will illustrate to the board your potential for leadership as a warrant officer.)

1.	DATES (YY/MM): <u>98/01</u> to <u>00/05</u>	ORGANIZATION: Kelly Temporary Services, Grand Rapids MI
	POSITION TITLE: Administrative Assistant DUTIES (list below to include significant contributions): List civilian employment experience that uniquely qualifies you for the warrant officer specialty which you are applying. Do not list civilian employment/experience if it is not germane to the warrant officer specialty you are applying for.	
2.	DATES (YY/MM): _____ to _____	ORGANIZATION: _____
	POSITION TITLE: _____ DUTIES (list below to include significant contributions): _____	
3.	DATES (YY/MM): _____ to _____	ORGANIZATION: _____
	POSITION TITLE: _____ DUTIES (list below to include significant contributions): _____	

**SECTION VI - MILITARY EDUCATION**

(List up to 21 military courses and give a brief description focusing on the main learning objective.)

1.	DATES (YY/MM): <u>00/08</u> to <u>00/07</u>	COURSE: Unit Movement Officer Course (UMO), Ft Sill, OK
DESCRIPTION: Special skill courses such as airborne, air assault, pathfinder and the like are NOT necessary to list; they should appear on your ERB. Correspondence course completion that PERTAINS to the warrant officer specialty you are applying for may be listed.		
2.	DATES (YY/MM): <u>98/01</u> to <u>98/03</u>	COURSE: Advance Individual Training (AIT) Ft Atterbury, IN
DESCRIPTION: Make all entries reader-friendly and avoid overuse of acronyms. There will be board members unfamiliar with your MOS so use easily understood terms. Keep all descriptions short, concise, and to the point while focusing on the main learning objective of the course.		
3.	DATES (YY/MM): _____ to _____	COURSE:
DESCRIPTION:		

**SECTION VII - SUMMARY**

Write a paragraph or two explaining why you are fully qualified to perform the duties of a warrant officer in your skill. This is a very important part of the resume. Make this a call to action, but do so without turning off the reader. Include all of your significant accomplishments/achievements (below-the-zone promotions, impact awards, noteworthy distinctions, deployments, challenging assignments, unique skills in MOS, standards exceeded on a significant inspection/evaluation, etc). Explain how you are exceptionally qualified and have the leadership, management and technical skills needed to become a warrant officer. Answer this question: What have you done or accomplished that sets you apart from your peers? (Additionally, aviator applicants should include why they want to be an Aviator.)

RESUMES WILL NOT BE PROCESSED WITHOUT THE APPLICANT'S SIGNATURE & DATE.

**Other notes:**

No other resume formats are acceptable beyond USAREC FORM 1935. Therefore, do not go through a big expense by having external parties professionally prepare your resume. Simply follow the aforementioned guidelines and prepare the form yourself. If you are non-Army, the resume takes on increased importance in conveying your qualifications to become an Army Warrant Officer. PureEdge Form package may be utilized by visiting any Army Recruiting Station; USAREC forms may be obtain at <http://www.usarec.army.mil/im/formpub/Forms.htm>. Good luck!

**SECTION VIII - SIGNATURE**

1. NAME ( <i>Last, first, middle initial</i> ): SAMPLE, Joe E.	2. RANK: SGT/E5	3. SIGNATURE:	4. DATE (YYYYMMDD):
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**LETTER OF RECOMMENDATION**

(Warrant Officer Procurement Program)

**PRIVACY ACT STATEMENT****AUTHORITY:** Collection of this information is authorized by Title 10, USC, Sections 503, 505, 508, 3013, and 12102 and Executive Order 9397.**PRINCIPAL PURPOSE:** Information collected will be used by selection board members to determine qualifications of warrant officer candidates.**ROUTINE USES:** Blanket routine use disclosures as described in AR 340-21, The Army Privacy Program, paragraph 3-2.**DISCLOSURE:** Voluntary; however, failure to provide the information may delay or terminate the warrant officer candidate's application process.**SECTION I - ADMINISTRATIVE DATA**1. NAME (*Last, first, middle initial*):

SAMPLE, Joe E.

2. SSN:

111-22-3344

3. RANK:

SGT

4. DATE OF RANK:

1 SEPTEMBER 2002

5. UNIT, ORGANIZATION, STATION, ZIP CODE OR APO, MAJOR COMMAND:

C DET

1-4 INF BATTALION

FT ATTERBURY, KY 40121

(CENTCOM)

6. I am completing this form as the applicant's:

☒ Senior Warrant Officer☐ Company Grade Officer☐ Field Grade Officer☐ Other \_\_\_\_\_

(Specify)

7. I have known this applicant from 2004/12 to PRESENT.  
(Year/Month) (Year/Month)8. RELATIONSHIP TO APPLICANT (*i.e., supervisor, interviewer*):

Interviewer

**SECTION II - NARRATIVE**

(Write a narrative explaining the applicant's leadership qualities, character, experience, and special expertise that uniquely qualify him or her to serve as a future warrant officer.)

**NARRATIVE:**

1. Letters should be should be 3 to 5 paragraphs with specific, quantifiable comments about the service members character and tactical and technical competence.

2. You may use information from the service member's entire record, including comments about schools completed, assignments, deployments, impact awards, achievements and accomplishments.

3. Generic flowery comments are not effective in communicating the service member's attributes to board members. If you can change the name of the person being recommended to someone else and the comments are not false, then the letter is probably too generic to communicate effectively to board members.

**EXAMPLE WRITE-UP:**

1. It is my absolute privilege to recommend SGT Sample for entry into the Warrant Officer Procurement Program as a Human Resources Technician (420A). I have reviewed SGT Sample's credentials and found his records very worthy for warrant officer candidacy. As such, SGT Sample has earned my vote of confidence to compete for warrant officer selection.

2. SGT Sample served with me during a year-long deployment to Balad, Iraq 2004. During this time, I personally observed and worked with SGT Sample on several personnel support issues. My observation of him is that of an industrious Senior Personnel Sergeant fully capable of performing his administrative duties. SGT Sample worked tirelessly processing personnel actions for 849th Transportation Battalion, Ft Bragg NC. Those actions included; Joint Personnel Status Reporting (JPERSTAT), Casualty Operations, ID Tags, Fighter Management Pass Program (FMPP), legal processing and administrative advisor to both the Battalion and Company Commander. Without question, SGT Sample superbly performed AG Wartime Functions in accordance with FM 12-6.

3. SGT Sample possesses the qualities of a self-starter and a leader. His mastery of warrior tasks and drills led to his selection as NCO of the Quarter. Further, he mentored a subordinate to compete and win 1st TSC's Solider of the Year competition. SGT Sample completed BNCOC with a 97.4 GPA. He has received numerous valor and service awards for technical merit including the prestigious Bronzes Star. SGT Sample is active within the community and is not afraid to dialog regarding the issues of the day. He is a well-rounded, respected member of both the military and civilian community.

4. In conclusion, SGT Sample has a rare blend of technical and tactical proficiency as evident by his outstanding military career. For this reason, I gladly recommend him for acceptance into the Warrant Officer Corps as a Human Resources Technician (420A)

**SECTION III - DISCLAIMER****Notice: I understand by submitting this recommendation I am endorsing this applicant to be boarded for warrant officer selection.****SECTION IV - SIGNATURE**1. NAME (*Last, first, middle initial*):

DOE, John Q.

2. RANK:

CW4

3. BRANCH:

AG

4. SIGNATURE:

5. DATE (YYYYMMDD):

\_\_\_\_\_  
(Date)

MEMORANDUM FOR Commander, US Army Recruiting Command, ATTN: RCRO-SM, Fort Knox,  
KY 40121-2726

SUBJECT: Results of Medical Examination

The results of a commissioning/aviation physical are furnished for the following individual:

a. \_\_\_\_\_  
(Rank) (Print or Type Last Name, First Name, MI)

b. \_\_\_\_\_  
(SSN)

c. \_\_\_\_\_  
(Unit, Company, Duty Station)

d. Physical Profile Code:

P	U	L	H	E	S

e. Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Age: \_\_\_\_\_

f. Physical initiated on: \_\_\_\_\_  
(Date)

g. Physical completed on: \_\_\_\_\_  
(Date)

h. If Flight Physical, date approved from USAAMC: \_\_\_\_\_ Stamped: \_\_\_\_\_  
(Applicant must include page one showing stamp from Fort Rucker.) (1W, 1A)

i. Individual \_\_\_\_\_ is Fully Qualified \_\_\_\_\_ is NOT Fully Qualified.

\_\_\_\_\_  
(Physician's Signature)

\_\_\_\_\_  
(Physician's Stamp)

**NOTE:**

- (1) 153A & 150A applicants must also include page one of DD Form 2808 with the applicable qualified stamp from USAAMC, Ft. Rucker, AL.
- (2) Any applicant applying for an APFT or medical waiver must include entire physical.

REPORT OF MEDICAL EXAMINATION				1. DATE OF EXAMINATION		2. SOCIAL SECURITY NUMBER							
<b>PRIVACY ACT STATEMENT</b> <b>AUTHORITY:</b> 10 USC 504, 505, 507, 532, 978, 1201, 1202, and 4346; and E.O. 9397 <b>PRINCIPAL PURPOSES(S):</b> To obtain medical data for determination of medical fitness for enlistment, induction, appointment and retention for applicants and members of the Armed Forces. The information will also be used for medical boards and separation of Service Members from the Armed Forces. <b>ROUTINE USES:</b> None. <b>DISCLOSURE:</b> Voluntary; however, failure by an applicant to provide the information may result in delay or possible rejection of the individual's application to the Armed Forces. For an Armed Forces member, failure to provide the information may result in the individual being placed in a non-deployable status.													
3. LAST NAME - FIRST NAME - MIDDLE NAME (SUFFIX)			4. HOME ADDRESS( <i>Street, Apartment Number, City, State, and ZIP Code</i> )			5. HOME TELEPHONE NUMBER ( <i>Include Area Code</i> )							
			FT RUCKER , AL 36362										
6. GRADE W1		7. DATE OF BIRTH		8. AGE		9. SEX							
11.TOTAL YEARS GOVERNMENT SERVICE a. MILITARY                      b. CIVILIAN		12. AGENCY ( <i>Non-Service Members Only</i> )			13. ORGANIZATION UNIT AND UIC/CODE BC01-145TH								
14.a. RATING OR SPECIALITY ( <i>Aviators only</i> )		b. TOTAL FLYING TIME			c. LAST SIX MONTHS								
15.a. SERVICE <input checked="" type="checkbox"/> Army <input type="checkbox"/> Coast Guard <input type="checkbox"/> Navy <input type="checkbox"/> Marine Corps <input type="checkbox"/> Air Force		b. COMPONENT <input checked="" type="checkbox"/> Active Duty <input type="checkbox"/> Reserve <input type="checkbox"/> National Guard		c. PURPOSE OF EXAMINATION <input type="checkbox"/> Enlistment <input type="checkbox"/> Medical Report <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Commission <input type="checkbox"/> Retirement <input type="checkbox"/> Retention <input type="checkbox"/> U.S. Service Academy <input checked="" type="checkbox"/> Flight <input type="checkbox"/> Separation <input type="checkbox"/> ROTC Scholarship Program		16. EXAMINING LOCATION AND ADDRESS (Including ZIP Code) 01011 US ARMY AEROMEDICAL CENTER PHYSICAL EXAM SECTION LYSTER ARMY HOSPITAL, BLDG 301 FT RUCKER, AL 36362-5333							
<b>CLINICAL EVALUATION</b> (Check each item in appropriate column. Enter "NE" if not evaluated)													
				Nor- mal	Ab- norm	NE	44. Notes (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additio sheets if necessary.)  <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">CLASS</td> <td>RW Class RW, WOC Rucker student aviato</td> </tr> <tr> <td>DIGITAL RECTAL</td> <td></td> </tr> <tr> <td>STOOL GUIAC</td> <td></td> </tr> </table> <b>FORM ONLY REQUIRED FOR THE FOLLOWING APPLICANTS:</b>  153A - Rotary Wing Aviator Class 1 Flight Physical  150A - Air Traffic and Space Management Technician Class IV Flying Duty Medical Examination (FDME)	CLASS	RW Class RW, WOC Rucker student aviato	DIGITAL RECTAL		STOOL GUIAC	
CLASS	RW Class RW, WOC Rucker student aviato												
DIGITAL RECTAL													
STOOL GUIAC													
17.Head, face, neck, and scalp				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
18.Nose				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
19.Sinuses				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
20.Mouth and throat				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
21.Ears - General ( <i>Int. and ext. canals/Auditory acuity under item 71</i> )				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
22.Drums ( <i>Perforation</i> )				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
23.Eyes - General ( <i>Visual acuity and refraction under items 61 - 63</i> )				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
24.Ophthalmoscopic				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
25.Pupils ( <i>Equality and reaction</i> )				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
26.Ocular motility ( <i>Associated parallel movements, nystagmus</i> )				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
27.Heart ( <i>Thrust, size, rhythm, sounds</i> )				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
28.Lungs and chest ( <i>Include breasts</i> )				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
29.Vascular system( <i>Varicosities, etc.,</i> )				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
30.Anus and rectum( <i>Hemorrhoids, Fistulae</i> ) ( <i>prostate, if indicated</i> )				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
31.Abdomen and viscera( <i>Include hernia</i> )				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
32.External genitalia( <i>Genitourinary</i> )				<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>							
33.Upper extremities				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
34.Lower extremities				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
35.Feet ( <i>See item 3</i> )				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
36.Spine, other mus				<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>							
37.Identifying body				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
38.Skin, lymphatics				<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>							
39.Neurologic				<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>							
40.Psychiatric ( <i>Spec</i> )				<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>							
41.Pelvic ( <i>Females c</i> )				<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>							
42.Endocrine				<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>							
43.DENTAL DEFECTS AND DISEASE ( <i>Please explain. Use dental form if completed by dentist. If dental examination not done by dental officer, explain in Item 44.</i> ) <input checked="" type="radio"/> Acceptable				35.FEET ( <i>Continued</i> ) <input checked="" type="radio"/> Normal Arch <input type="checkbox"/> Mild <input type="checkbox"/> Asymptomatic <input type="radio"/> Pes Cavus <input type="checkbox"/> Moderate									

DEPT OF THE ARMY  
ARMY AEROMEDICAL CENTER  
  

20-OCT-2015

  
  
A 00022772821  
  
QUALIFIED  
1W  
CLASS \_\_\_\_\_ FLYING DUTY

Date, must not expire  
within two years of  
completion of WOCS

REPORT OF MEDICAL EXAMINATION				1. DATE OF EXAMINATION (YYYYMMDD) 20090210	2. SOCIAL SECURITY NUMBER 234-55-5555
PRIVACY ACT STATEMENT AUTHORITY: 10 USC 504, 505, 507, 532, 978, 1201, 1202, and 4346; and E.O. 9397. PRINCIPAL PURPOSE(S): To obtain medical data for determination of medical fitness for enlistment, induction, appointment, and members of the Armed Forces. The information will also be used for medical boards and separation of the Armed Forces. ROUTINE USE(S): None. DISCLOSURE: Voluntary; however, failure by an applicant to provide the information may result in delay or possible rejection of the individual's application to enter the Armed Forces. For an Armed Forces member, failure to provide the information may result in the individual being placed in a non-deployable status.					
3. LAST NAME - FIRST NAME - MIDDLE NAME (SUFFIX) James, James Lee			4. HOME ADDRESS (Street, Apartment Number, City, State and ZIP Code) 1234 Hopkins Dr APT # 123, Columbia, S.C 29061		5. HOME TELEPHONE NUMBER (Include Area Code) (813)555-5555
6. GRADE SFC	7. DATE OF BIRTH (YYYYMMDD) 19701023	8. AGE 38	9. SEX <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	10.a. RACIAL CATEGORY (X one or more) <input checked="" type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Decline to Respond	b. ETHNIC CATEGORY <input checked="" type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/> Decline to Respond
11. TOTAL YEARS GOVERNMENT SERVICE a. MILITARY 12 b. CIVILIAN		12. AGENCY (Non-Service Members Only)		13. ORGANIZATION UNIT AND UIC/CODE HHC, 264TH (WYQCSB0)	
14.a. RATING OR SPECIALTY (Aviators Only) Motor Officer		b. TOTAL FLYING TIME		c. LAST SIX MONTHS	
15.a. SERVICE <input checked="" type="checkbox"/> Army <input type="checkbox"/> Coast Guard <input type="checkbox"/> Navy <input type="checkbox"/> Marine Corps <input type="checkbox"/> Air Force		b. COMPONENT <input checked="" type="checkbox"/> Active Duty <input type="checkbox"/> Reserve <input type="checkbox"/> National Guard		c. PURPOSE OF EXAMINATION <input checked="" type="checkbox"/> Enlistment <input type="checkbox"/> Medical Board <input type="checkbox"/> Commission <input type="checkbox"/> Retirement <input type="checkbox"/> U.S. Service Academy <input type="checkbox"/> ROTC Scholarship Program <input type="checkbox"/> Other	
16. NAME OF EXAMINING LOCATION, AND ADDRESS (Include ZIP Code) 28th MSD 2800 DOOLITTLE DR FORT JACKSON, SC 29061					
CLINICAL EVALUATION (Check each item in appropriate column. Enter "X" in appropriate column. Enter "N" for normality in detail. Enter pertinent item in detail. Continue in item 73 and use additional sheets.)					
17. Head, face, neck, and scalp		Normal		X	
18. Nose		Normal		X	
19. Sinuses		Normal		X	
20. Mouth and throat		Normal		X	
21. Ears - General (Int. and ext. canals/Auditory acuity under item 71)		Normal		X	
22. Drums (Perforation)		Normal		X	
23. Eyes - General (Visual acuity and refraction under items 61 - 63)		Normal		X	
24. Ophthalmoscopic		Normal		X	
25. Pupils (Equality and reaction)		Normal		X	
26. Ocular motility (Associated parallel movements, nystagmus)		Normal		X	
27. Heart (Thrust, size, rhythm, sounds)		Normal		X	
28. Lungs and chest (Include breasts)		Normal		X	
29. Vascular system (Varicosities, etc.)		Normal		X	
30. Anus and rectum (Hemorrhoids, Fistulae) (Prostate if indicated)		Normal		X	
31. Abdomen and viscera (Include hernia)		Normal		X	
32. External genitalia (Genitourinary)		Normal		X	
33. Upper extremities		Normal		X	
34. Lower extremities (Except feet)		Normal		X	
35. Feet (See Item 35 Continued)		Normal		X	
36. Spine, other musculoskeletal		Normal		X	
37. Identifying body marks, scars, tattoos		Normal		X	
38. Skin, lymphatics		Normal		X	
39. Neurologic		Normal		X	
40. Psychiatric (Specify any personality deviation)		Normal		X	
41. Pelvic (Females only)		Normal		X	
42. Endocrine		Normal		X	
43. DENTAL DEFECTS AND DISEASE (Please explain. Use dental form if completed by dentist. If dental examination not done by dentist officer, explain in item 44.)		X Acceptable Not Acceptable Class		35. FEET (Continued) (Circle category) Normal Arch Mild Asymptomatic Pes Cavus Moderate Pes Planus Severe Symptomatic	

Ensure SSN is correct

Must "X" "commission" or  
"other" with "WOCS"  
specified.

LAST NAME - FIRST NAME - MIDDLE NAME (SUFFIX) James, James Lee										SOCIAL SECURITY NUMBER 234-55-5555																															
<b>LABORATORY FINDINGS</b>																																									
45. URINALYSIS					a. Albumin					46. URINE HCG					47. H/H					48. BLOOD TYPE																					
					b. Sugar																																				
<b>TESTS</b>					<b>RESULTS</b>					<b>HIV SPECIMEN ID LABEL</b>					<b>DRUG TEST SPECIMEN ID LABEL</b>																										
49. HIV																																									
50. DRUGS																																									
51. ALCOHOL																																									
52. OTHER																																									
a. PAP SMEAR																																									
b.																																									
c.																																									
<b>MEASUREMENTS AND OTHER FINDINGS</b>																																									
53. HEIGHT			54. WEIGHT lbs.			55. MIN WGT - MAX WGT			MAX BF %			56. TEMPERATURE			57. PULSE																										
58. BLOOD PRESSURE									59. RED/GREEN (Army Only)						60. OTHER VISION TEST																										
a. 1ST			b. 2ND			c. 3RD																																			
SYS.			SYS.			SYS.																																			
DIAS.			DIAS.			DIAS.																																			
61. DISTANT VISION						62. REFRACTION BY AUTOREFRACTION OR MANIFEST						63. NEAR VISION																													
Right 20/						Corr. to 20/						By						S. CX						Right 20/						Corr. to 20/						by					
Left 20/						Corr. to 20/						By						S. CX						Left 20/						Corr. to 20/						by					
64. HETEROPHORIA (Specify distance)																																									
ES ° EX ° R.H. L.H. Prism div. Prism Conv CT NPR PD																																									
65. ACCOMMODATION						66. COLOR VISION (Test used and result)						67. DEPTH PERCEPTION (Test used and score) AFVT																													
Right						Left						PIP						/14								Uncorrected						Corrected									
68. FIELD OF VISION									69. NIGHT VISION (Test used and score)									70. INTRAOCULAR TENSION																							
																		O.D. O.S.																							
71a. AUDIOMETER				Unit Serial Number																71b. Unit Serial Number				72a. READING ALOUD TEST																	
				Date Calibrated (YYYYMMDD)																				Date Calibrated (YYYYMMDD)																	
HZ		500		1000		2000		3000		4000		6000		HZ		500		1000		2000		3000		4000		6000		SAT		UNSAT											
Right														Right																											
Left														Left																											
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY (Use additional sheets if necessary.)																																									



**? Person Summary****\*\* SAMPLE PAGE \*\*****PLUMMER, JOE D.****Person Category**

enlisted (Active) (USA) ▼

**SSN:****Open Investigation:** N/A**PSQ Sent Date:** N/A**Attestation Date:** N/A**Incident Report:** N/A**SF 713 Fin Consent Date:** N/A**SF 714 Fin Disclosure  
Date:** N/A**Polygraph:** N/A**Foreign Relation:**

N/A

**Date of Birth:****Marital Status:** N/A**Place of Birth:** North Carolina**Citizenship:** U.S. Citizen**NdA Signed:** No**NdS Signed:** No**Accesses**

Category	PSP	Suitability and Trustworthiness
Enlisted (Active) (USA)	SECRET	IT: N/A  Public Trust: N/A  Child Care: N/A

**Person Category Information****Category Classification:** N/A**Organization:** W1MAAA, WMS USA RECRUITING SUP CMD, , FT KNOX, KY, 40121**Organization Status:** N/A**Occupation Code:** N/A**Separation Date:** N/A**SCI SMO:** N/A

W1MAA - COMMANDER USAREC, Level 4,

**Non-SCI SMO:****Servicing SMO:** Yes**Office Symbol:** N/A**Position Code:** N/A**Arrival Date:** N/A**Office Phone Comm:** N/A**Separation Status:** N/A**Interim:** N/A**Grade:** E3**PS:** N/A**RNLTD:** N/A**Office Phone DSN:** N/A**TAFMSD:** 2012 04 15**Proj. Departure Date:** 2018 04 11**Proj. UIC/RUC/PASCODE:** WJL7T0[Report Incident](#)[In/Out Process](#)**Investigation Summary**

NACLC from OPM, Opened: 2006 03 17 Closed 2006 10 04

NAC from UnKnown, Opened: Closed 1998 02 10

**Adjudication Summary**

PSI Adjudication of NACLC OPM, Opened 2006 03 17, Closed 2006 10 04,

# APPLICATION FOR ACTIVE DUTY

For use of this form, see AR 135-210; the proponent agency is DCSPER

## DATA REQUIRED BY THE PRIVACY ACT OF 1974

**AUTHORITY:** Title 10 USC, 672(d), 10 USC 275.

**PRINCIPAL PURPOSE:** Used by Reserve Component soldiers to apply for active duty programs announced by HQDA. Application is reviewed to determine the member's eligibility for announced active duty requirements.

**ROUTINE USES:** To determine qualifications and make final selection of individuals applying for active duty. Also used to schedule medical examinations, security screening and to issue active duty orders. The SSN is used to identify the soldier.

**DISCLOSURE:** Disclosure of your SSN and other personal information is mandatory for soldiers applying for active duty programs announced by HQDA.

## SEE INSTRUCTIONS ON PAGE 2 BEFORE COMPLETING THIS FORM.

1. DATE <b>Current Date</b>	2. TO: Commander, U.S. ARMY RECRUITING COMMAND, FORT KNOX KY 40121		
3. FROM (Last, First, MI) WHO, You A.	4a. PRESENT RESERVE GRADE	4b. RESERVE COMPONENT	
4c. SSN 000-00-0000	4d. BRANCH NA	5a. MOS/AOC 27D30	5b. COMPONENT RA
6a. PERMANENT HOME ADDRESS (Include ZIP code) ENTER YOUR HOME OF RECORD			6b. PHONE NO. (Include area code) (502)765-6868
7a. TEMPORARY ADDRESS (Include ZIP code) 419A Nicholson Road Fort Hood, TX 76544		7b. DURATION Oct 2002	7c. PHONE NO. (Include area code) (517)773-2527

## ITEM 8 TO BE COMPLETED ONLY BY PERSONNEL CURRENTLY SERVING ON ACTIVE DUTY IN A WARRANT OFFICER OR ENLISTED STATUS.

8a. PRESENT ACTIVE DUTY GRADE E-6	8b. SSN 000-00-0000	8c. ORGANIZATION AND STATION ASSIGNMENT HHC, III Corps, Fort Hood, TX 76544
--------------------------------------	------------------------	--

9. I hereby volunteer to enter on active duty, for the period indicated below, in my branch or any of the following branches that I may be qualified for; and if accepted for active duty in another branch, I request transfer to that branch: (Check as appropriate)

☒ a. FOR A PERIOD OF **6** YEARS ☐ b. FOR AN INDEFINITE PERIOD

c. OTHER BRANCHES (List in order of preference)

10. I understand that if accepted for active duty I may be assigned to any command, including an overseas command, to fill any Army-wide vacancy. However, I would like to be considered for one of the three duty assignments and areas of assignment listed below in the order of my choice.

	CHOICE NO. 1	CHOICE NO. 2	CHOICE NO. 3
a. DUTY ASSIGNMENT	<b>270A</b>	<b>270A</b>	<b>270A</b>
b. AREA ASSIGNMENT	<b>Germany</b>	<b>Fort Knox, KY</b>	<b>Fort Hood, TX</b>

11. If it is possible, I prefer to enter on active duty during one of the three periods indicated below in order of preference:

PREFERENCE NO. 1 (Month and Year) <b>ASAP</b>	PREFERENCE NO. 2 (Month and Year) <b>ASAP</b>	PREFERENCE NO. 3 (Month and Year) <b>ASAP</b>
--	--	--

12. Upon receipt of active duty orders, I will require the time indicated below to settle my affairs for entry on active duty. (Check appropriate box)

☐ 60 DAYS ☐ 30 DAYS ☐ 10 DAYS ☒ **AVAILABLE ON DATE OF RECEIPT OF ORDERS**

13. REMARKS (If more space is needed, continue on separate sheet)

Include information you consider essential in making your assignment, i.e. enrolled in the Exceptional Family Member Program or Army Married Couples Program.

14. SIGNATURE OF APPLICANT

**Applicant's Signature**

## INSTRUCTIONS

Read these instructions carefully and follow them. Reserve Component officers are normally recalled in their current Reserve grade. Grade of an individual applying for appointment and concurrent order to active duty will be determined by the approving authority.

1. **SUBMIT IN DUPLICATE.** Use typewriter, if practicable; if not, print clearly in ink. If space is insufficient for a particular item, continue under item 13, "Remarks," or on a separate sheet, indicating applicable item number.

2. The following instructions for items listed should be followed. Items not listed are considered to be self-explanatory.

**ITEM 2.** Insert appropriate area command such as *U.S. Army Europe, U.S. Army Pacific Command*, etc. as follows:

- a. Personnel serving on active duty in a warrant officer or enlisted status: Enter the area command in which serving on active duty.
- b. All others: Enter the area command having assignment jurisdiction over you.

**ITEM 4.** Items 4a through 4d will be completed by individuals currently holding appointments or enlistments as Reserves of the Army.

- a. Item 4a: Enter present grade. Warrant officers will include *Pay Grade in this item, such as WO, W-1, CWO, W-2*, etc.
- b. Item 4b: Enter the Reserve component of the Army to which assigned, using the following abbreviations:  
"ARNGUS" for members assigned to the Army National Guard of the United States.  
"USAR" for members assigned to the Army Reserve
- c. Item 4c: Enter social security number.
- d. Item 4d: Commissioned officers--enter the branch to which assigned.

**ITEM 5.** Complete as specified below.

- a. Item 5a: Enter your primary MOS or AOC.
- b. Item 5b: Individuals applying for appointment as Reserve officers of the Army with concurrent active duty--enter the Reserve component for which applying.

**ITEM 6.** In this instance the term "Permanent Home Address" corresponds to your "Home of Record," an official term used in determining entitlement to travel allowances on separation from the service. This address will be indicated in orders placing you on active duty. NO CHARGE IN HOME OF RECORD IS AUTHORIZED AFTER ENTRY ON ACTIVE DUTY.

- a. *For applicants not on active duty* --Enter your permanent home address.
- b. *For applicants currently on active duty as warrant officers* --Enter home of record as shown on your warrant officer active duty orders.
- c. *For applicants on duty as enlisted persons* --Enter home address as shown on your Enlistment Record (*DD Form 4*).

**ITEM 7.** This item to be completed if it is anticipated that you will be at this address when orders are issued. The temporary address, if furnished, will be included in your orders and you will enter on active duty from this address.

- a. Item 7b: Show maximum period you anticipate being at the temporary address, such as "Until (*give month and year*)."
- b. Item 7c: Furnish the telephone number at your temporary address.

**ITEM 13.** Include all information you consider essential from the standpoint of assignment restriction.

3. **IMPORTANT** --Review your application to ensure accuracy and completeness. Then forward your application according to applicable following instructions:

**SOLDIERS OF THE ARMY NATIONAL GUARD OF THE UNITED STATES:** To your unit commander. Applicants who are ARNG OCS candidates, OBC students, or attending aviator courses will apply through proper school commandant.

**SOLDIERS OF THE ARMY RESERVE:** To your unit commander, if assigned to a unit. If not, send to HQDA, Appointments Directorate, ATTN: TAPC-OPD-RD, 9700 Page Avenue, St. Louis, MO 63132-5200. Applicants who are USAR OCS candidates, OBC students, or attending aviator courses will apply through proper school commandant.

**WARRANT OFFICERS OR ENLISTED PERSONNEL ON ACTIVE DUTY:** To your present unit commander.

**INDIVIDUALS APPLYING FOR APPOINTMENT WITH CONCURRENT ACTIVE DUTY:** Submit together with your application for appointment according to regulations applicable to the type of appointment requested.



REPLY TO  
ATTENTION OF

## DEPARTMENT OF THE ARMY

MEMORANDUM FOR Commander, U.S. Army Recruiting Command, ATTN: RCRO-SPA, Fort Knox, KY  
40121-2725

SUBJECT: Request for Prerequisite Waiver

Mitigating circumstances:

1. (State the type of waiver you are requesting)

Example: (1) Request an age waiver

(2) Request an Active Federal Service Waiver

(3) Request a prerequisite waiver (state the prerequisite(s) you wish to waive).

2. Anyone can request a prerequisite, AFS or age waiver, but not everyone will get them approved. Give a detailed explanation why you feel this waiver should be approved. Please note that waivers are approved only in unusual circumstances. Prerequisite waiver requests that do not give adequate justification, Le. unusual skills, unique talents, special circumstances, etc. will probably be disapproved. With AFS waivers (required if you have 12 or more years AFS) or age waivers (required if you will be 33 or older for aviators or 46 for technicians, by the convene date of the board) the same principle applies and requests must be fully justified. Adequate justification might be: unusual circumstances, deployed for past year and unable to submit a packet, unusual skills, or unique talents. Asking for these waivers just because they are a part of the application will not result in approval.

Notes:

1). A separate waiver request must be submitted for each MOS that applicant does not meet the entire prerequisites for. Waiver should include why you feel that you should be accepted in the MOS without meeting all the requirements. Include any civilian experience, training or assignments that are similar to MOS you wish to apply for.

2). Make your request sound valid - for instance, an applicant stating they couldn't apply for the last 12 years because they were deployed... That doesn't sound valid because no one has been away from their duty station continuously over the last 12 years. You would need to include why you couldn't or didn't apply in between deployments. Another example is a 13 year request stating "I've been deployed for the last year..." does not explain why you didn't apply in the years leading up to the deployment.

3). Waiver request will not appear before the selection board once approved. Please use as much space as required to give all the information. A short and simple approach may result in a denied request.

4). Writing skills count. A properly written request ultimately may effect the approval of the request. Board members may interpret poor English, grammar and typographical errors as a lack of concern, sincerity or attention to detail from the applicant.



REPLY TO  
ATTENTION OF

## DEPARTMENT OF THE ARMY

MEMORANDUM FOR Commander, U.S. Army Recruiting Command, ATTN: RCRO-SPA, Fort Knox, KY  
40121-2725

SUBJECT: Request for Moral Waiver

1. Nature of offense: Do not just list Article 92, Article 32, etc. Must request a moral waiver for any infractions listed on your enlistment contract.

a. Date of offense: (Month and year)

b. Place of offense: (City and State)

c. Punishment imposed: (Fine amount, forfeiture amount, extra duty, letter of reprimand, etc.)

2. Mitigating circumstances:

\*You will use this moral waiver request if you responded YES to block#26 on DA Form 61. If you responded NO, you do not need a moral waiver.

Moral waiver is not required for traffic fines of \$250 or less. Do NOT include court cost).

Mitigating circumstances surrounding the charge: Four points to address:

- (1) Explain the incident (what, where, when, how, etc.. )
- (2) Accepting responsibility for your actions
- (3) The lessons learned
- (4) How you now contribute to your unit, community and military service.

Notes:

- 1.) A separate moral waiver request must be submitted for each offense.
- 2.) Moral waiver request should give all the information possible related to the incident. Half answers and undisclosed information can cause a delay in processing. In some cases - the request will be returned to USAREC with a request for more information from applicant.
- 3.) This waiver request will not go before the selection board once approved. Please use as much space as required to give all the information. A short and simple approach may cause a returned request.
- 4.) Writing skills count. A properly written request may effect the approval of the request. HRC may interpret poor English, grammar and typographical errors as a lack of concern, sincerity or attention to detail from the applicant.

Joe E. Sample  
SGT/E-5  
111-22-3333



REPLY TO  
ATTENTION OF

## DEPARTMENT OF THE ARMY

MEMORANDUM FOR Commander, U.S. Army Recruiting Command, ATTN: RCRO-SPA, Fort Knox, KY  
40121-2725

SUBJECT: Request for Army Physical Fitness Test Waiver

Mitigating circumstances:

1. State the type of profile to include your complete PULHES, the event(s) that you can no longer take, and what alternate event(s) you are allowed to take.
2. Give a detailed explanation why you believe this exception to policy should be approved in your case. Give an explanation of events that led up to the injury and how it happened. Explain your future expectations of your physical condition (i.e. come off profile after rehab, re-enlist, etc...).

NOTE: LEAVE PARAGRAPH 3 AS IS VERBATIM

3. I fully understand that applying for this waiver does not constitute an automatic approval. I further understand that I must be fully mission deployable in the Warrant Officer Specialty in which I am applying.

(SIGNATURE)  
(FULL NAME)  
(RANK)  
(SSN)



\_\_\_\_\_  
*Date*

MEMORANDUM FOR Commander, U.S. Army Recruiting Command, ATTN: RCRO-SPA, Fort Knox, KY  
40121-2725

SUBJECT: Statement of Understanding

1. I understand that if I am appointed as a warrant officer in the U.S. Army Reserves with concurrent active duty, that this appointment is contingent upon technical and tactical certification by successful completion of the appropriate warrant officer basic course unless I have been precertified by the warrant officer military occupational specialty (WOMOS) proponent. I understand that my application packet, to include all enclosures, may be converted to an electronic file and made available for review by qualifying officials at WOMOS proponent schools, Headquarters, Department of the Army, and other locations in order to determine my qualifications and competitive standing for appointment as a warrant officer.
2. I further understand that if I am appointed as a warrant officer in the U.S. Army Reserves without concurrent active duty, that this appointment is contingent upon technical and tactical certification by successful completion of the appropriate warrant officer basic course within 2 years of appointment unless I have been precertified by the WOMOS proponent or unless extended by Headquarters, Department of the Army.
3. I also understand that if I am eliminated from or fail to successfully complete the technical and tactical certification as specified above, I may be subject to discharge under regulations in effect at that time from the U.S. Army Reserves.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*First Name, Middle Initial, Last Name*

\_\_\_\_\_  
*Rank*

\_\_\_\_\_  
*Title or Position*